

SRF Disbursement Request Form

Participant Information

Name:	City of West Lafayette	SRF Loan Number:	WW141079 07
DUNS Number:	04 455 2636	CCR Number:	6NKJ2
Request Number:	33		
Mailing Address:	711 West Navajo Street		
City:	West Lafayette	State:	IN
ZIP:	47906		
Contact Person:	Judith C. Rhodes, Clerk-Treasurer	Contact Phone Number:	765-775-5150
Authorized Representative:	Mayor John R Dennis, or CI-Tr J. Rhodes	Authorized Representative Phone Number:	765-775-5100

If requesting reimbursement to the Participant by wire transfer please provide the following information:

Bank Name:		Bank Routing Number:	
Account Name:		Account Number:	

Loan Information

Description of work for which claim is being made (services, fees, type of work, etc.):	Sheraton and Fairway Knolls Lift Station Improvements		
Is any part of this claim funded by an alternate funding source?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
If yes, please identify the source and amount of the claim funded by the alternate source (OCRA, SAP, Local Funds):			\$
Is any part of this claim funded by the Indiana Brownfields Program?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Has the Participant paid the request and is now seeking reimbursement?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Is any part of this claim a result of a change order? If yes, please attach the SRF change order approval letter.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Are there Green Project Reserve components involved in this request?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
If yes, please describe:			

Loan Financial Information

Original Loan Amount:		\$	2,610,000.00
Total Amount of Previous Disbursements:		\$	2,183,802.00
Balance Available After this Disbursement:		\$	415,150.00
Amount to Contractor for this Request:		\$	11,048.00

Is any part of this request a partial or final release of retainage to the contractor? ☐ YES ☒ NO

Contractor Name:	Greeley and Hansen	DUNS Number:	04 569 9949
Mailing address:	Lockbox 619776, PO Box 6197		
City:	Chicago	State:	IL
ZIP Code:	60680-69197		

Wiring Information:

Bank Name:		Bank Routing Number:	
Account Name:		Account Number:	

Retainage Amount for this Request:

Participant requests that the retainage amount be held by SRF:	<input type="checkbox"/>
Participant requests that the retainage amount be sent to the Participant via check to the mailing address listed above:	<input type="checkbox"/>
Participant requests that the retainage amount be sent to the following bank:	<input type="checkbox"/>

Bank Name:		Bank Routing Number:	
Account Name:		Account Number:	

Total Amount of this Request: \$ **11,048.00**

The undersigned hereby certifies this request for disbursement is, to the best of my knowledge and belief, true and accurate and made in accordance with the conditions of the project agreement, that the certified payrolls received in connection with any enclosed construction invoices are in compliance with the **Davis Bacon Act/** US Department of Labor requirements of 29 CFR 5.5(a)(1).

Authorized Representative Signature:		Date:	NOV 04 2015
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For Internal Use Only:

Approved By:		Date:		GPR	\$	
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Revised on July 1, 2014



GREELEY AND HANSEN

100 S. Wacker Drive, Suite 1400
Chicago, Illinois 60606
p 312 558 9000
f 312 558 1006
www.greeley-hansen.com

October 21, 2015

Mr. David Henderson
Utility Director
City of West Lafayette
Wastewater Treatment Utility
500 South River Road
West Lafayette, IN 47906

RECEIVED

OCT 26 2015

UTILITY DIRECTOR

Subject: Sheraton & Fairways Knolls Lift Station Improvements
Invoice No. 0000448931

Dear David:

The enclosed invoice is for services related to the Sheraton & Fairways Knolls Lift Station Improvements in accordance with the agreement dated July 2, 2013.

Invoice No. 0000448931 covers services provided through October 09, 2015.

- Participated in September 23rd on site progress meeting
- Conducted start-up inspection to confirm anticipated pump performance was achieved
- Reviewed pay application number 6
- Reviewed and provided comment on two O&M submittals
- Coordination with SRF

Please call me if you have any questions.

Thank you.

Sincerely,

Greeley and Hansen

Joseph M. Teusch

Jmt/img

INVOICE

For customer service, call 312 578 2375.



GREELEY AND HANSEN

P.O. Box 6197
Chicago, Illinois 60680-6197
p 312 558 9000
www.greeley-hansen.com

Billing Number: 19
Invoice Number: INV-0000448931

Invoice Date: 10/21/2015

Description: AUTHORIZATION: FOR ENGINEERING SERVICES FOR THE SHERATON & FAIRWAY KNOLLS LIFT STATION
IMPROVEMENTS IN ACCORDANCE WITH THE AGREEMENT DATED JULY 2, 2013

Bill To:
CITY OF WEST LAFAYETTE
ATTN: MR. DAVID HENDERSON
UTILITY DIRECTOR
500 SOUTH RIVER ROAD
WEST LAFAYETTE, IN 47906

Remit To:
GREELEY AND HANSEN
LBX 619776
P.O. Box 6197
CHICAGO, IL 60680-6197

Customer Number: 0791

Contract Value
Cost: \$308,000.00
Fee: \$0.00
Total: \$308,000.00

Project Number: 07911.01
Project Name: SHERATON & FAIRWAY LS IMP
Terms: NET 30
Due Date: 11/20/2015

Cumulative Amount Billed: \$266,956.55

Billing Period From: 09/19/2015
To: 10/09/2015

D/L w/Multiplier 3.2
Total Labor

Sub-Consultants
Travel
Printing
Total ODC's

Mark-up on ODC's
Mark-up Subtotal

Invoice Subtotal
Invoice Total

Current Incurred Hours:

92.50

Current Amount	Cumulative Amount
<u>\$10,904.67</u>	<u>\$230,510.49</u>
\$10,904.67	\$230,510.49
\$0.00	\$32,797.50
143.81	668.81
0.00	-300.00
<u>\$143.81</u>	<u>\$33,166.31</u>
\$0.00	\$3,279.75
<u>\$0.00</u>	<u>\$3,279.75</u>
<u>\$11,048.48</u>	<u>\$266,956.55</u>
<u>\$11,048.48</u>	<u>\$266,956.55</u>

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GREELEY AND HANSEN

P.O. Box 6197
Chicago, Illinois 60680-6197
p 312 558 9000
www.greeley-hansen.com

Billing Number:	19	Project Number:	07911.01		
Invoice Number:	INV-0000448931	Project Name:	SHERATON & FAIRWAY LS IMP	Invoice Date:	10/21/2015

Non-T&M Labor Supporting Schedule

Group Description: Total Labor

Labor Cat Desc	Empl/Vendor	T/S Date	Current Hours	Current Amount
01 CIVIL- SANITARY ASSOCIATE	HEALY, TIMOTHY S		24.00	\$1,075.20
01			24.00	\$1,075.20
01 CIVIL- SANITARY ASSOCIATE	TEUSCH, JOSEPH M		12.00	713.04
01			12.00	\$713.04
01			36.00	\$1,788.24
02 CIVIL-SANITARY ENGINEER	CLEMENS, GRANT		52.00	1,468.48
02			52.00	\$1,468.48
02			52.00	\$1,468.48
04 CIVIL- SANITARY DRAFTER	RODENBECK, MATTHEW J		3.00	88.68
04			3.00	\$88.68
04			3.00	\$88.68
31 ELECTRICAL ASSOCIATE	BIELANSKI, JAY T		1.50	62.31
31			1.50	\$62.31
31			1.50	\$62.31
D/L w/Multiplier 3.2			92.50	\$3,407.71
Total Labor			92.50	\$3,407.71

INVOICE

**GREELEY AND HANSEN**

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Billing Number:	19	Project Number:	07911.01		
Invoice Number:	INV-0000448931	Project Name:	SHERATON & FAIRWAY LS IMP	Invoice Date:	10/21/2015

Non-Labor Supporting Schedule

Group Description: Total ODC's

Description	Transaction	JE No./ Vchr No.	Current FY/Pd	Vendor	Invoice ID	Current Amount
<u>Line Description:</u>	<u>Travel</u>					
Travel Local	Travel Local	247819	2015/11	GRANT CLEMENS	EXP 9/23/15	\$69.00 ✓
Travel Local	Travel Local	247824	2015/11	TIM HEALY	EXP 9/23/15	74.81 ✓
Total: Travel						<u>\$143.81</u>
Total ODC's						<u>\$143.81</u>

Sum of Entered Hours						
	BIELANSKI	CLEMENS	HEALY	RODENBECK	TEUSCH	Grand Total
09/21/15			2.50	3.00		5.50
09/22/15		1.00	1.00			2.00
09/23/15		4.50	4.00			8.50
09/24/15		4.00	3.00		1.00	8.00
09/25/15		1.50	0.50			2.00
09/28/15		4.00				4.00
09/29/15		2.00	0.50			2.50
09/30/15		1.50			2.00	3.50
10/01/15	1.50	2.00	0.50			4.00
10/02/15		4.50	1.00			5.50
10/05/15		3.00	2.00		3.00	8.00
10/06/15		8.00	1.50		3.50	13.00
10/07/15		8.00	2.00		2.50	12.50
10/08/15		8.00	3.50			11.50
10/09/15			2.00			2.00
Grand Total	1.50	52.00	24.00	3.00	12.00	92.50

2015

[illegible]

<u>G/L TRAVEL ACCOUNT #'s for DIRECT PROJECTS</u>	
5030	BILLABLE COSTS
5130	NON-BILLABLE COSTS

Refer to GL Account Codes for Indirect Project Acct. #'s.

NOTE:


Do Not Combine Billable Costs with Non-Billable Costs.

Use a Separate Expense Record for Billable and Non-Billable Costs.

LOCAL TRAVEL REFERENCE	MISCELLANEOUS REFERENCE
1. TAXI, LIMOUSINE, PUBLIC TRANSPORTATION	1. TELEPHONE
2. TOLLS AND PARKING	2. FILM & PHOTOGRAPHS
3. RENTAL CARS (INCLUDING GASOLINE)	3. OTHER _____
4. GAS, OIL, MAINTENANCE (G & H Leased cars only)	4. OTHER _____
5. OTHER _____	5. OTHER _____
6. OTHER _____	6. OTHER _____

2015

CLIENT OR PURPOSE West Lafayette			EMPLOYEE NAME Tim Healy			EMPLOYEE NO. 8337		ORG 125		DATE FROM 9/23/2015 TO 9/23/2015			
PROJECT INFORMATION			AUTO AND LOCAL TRAVEL			SUBSISTENCE			MISCEL.				
DATE	DESCRIPTION COST CODE	TRAVEL GL ACCT.	FARES AIR, RAIL ETC.	Miles	RATE	EXPENSE	OTHER EXPENSE	TOTAL AUTO & LOCAL	LODGING	FOOD	ALCOHOLIC BEV.	MISCEL. EXPENSE	TOTALS
9/23/2015	07911.01.600.01.602 Construction Progress Meeting	5030.00		130.1	0.575	\$74.808		\$74.81					\$74.81
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
					0.575	\$0.000		\$0.00					\$0.00
APPROVED BY:		TOTAL	\$0.00					\$74.81	\$0.00	\$0.00	\$0.00	\$0.00	\$74.81
(DO NOT USE BLACK INK)													


GREELEY AND HANSEN
 TRAVEL EXPENSE RECORD

EMPLOYEE SIGNATURE:
 (DO NOT USE BLACK INK)

G/L TRAVEL ACCOUNT #'s for DIRECT PROJECTS

5030 BILLABLE COSTS
 5130 NON-BILLABLE COSTS

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LOCAL TRAVEL REFERENCE

1. TAXI, LIMOUSINE, PUBLIC TRANSPORTATION
2. TOLLS AND PARKING
3. RENTAL CARS (INCLUDING GASOLINE)
4. GAS, OIL, MAINTENANCE (G & H Leased cars only)
5. OTHER _____
6. OTHER _____

MISCELLANEOUS REFERENCE

1. TELEPHONE
2. FILM & PHOTOGRAPHS
3. OTHER _____
4. OTHER _____
5. OTHER _____
6. OTHER _____